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Part III.—Administration of Special Health Functions.

1. Vital statistics.
2. Communicable diseases.
3. Contagious disease hospitals.
4. The health laboratory.
5. Tuberculosis.
6. Venereal diseases.
7. Industrial hygiene.
8. Mental hygiene.
9. The child welfare program.
10. Medical inspection of schools.
11. Public health nursing.
12. Hospitals and dispensaries.
13. General sanitation.
14. Food and drugs.
15. Rural hygiene.
16. Public health education.
17. Maritime quarantine.

Applications for enrollment in the course may be sent to Dr. Carl E. McCombs, Bureau of Municipal Research, 261 Broadway, New York City. It is intended, if possible, to limit enrollments to 50, and to give first consideration to those actually engaged in public health administration. If the number of applicants is sufficient to warrant extending the opportunity to more than 50 public health executives and to other health workers outside the field of public administration, such arrangement will be made if it is otherwise practicable.

DEATHS DURING WEEK ENDED FEBRUARY 22, 1919, IN CITIES.

The following table shows the registered deaths from all causes, and from pneumonia (all forms) and influenza combined, in certain large cities of the United States during the week ended February 22, 1919. The annual death rates per 1,000 population for the week and for the corresponding week of previous years are also shown.

The data are taken from the "Weekly Health Index," February 25, 1919, issued by the Bureau of the Census, Department of Commerce. The populations used in computing the rates are estimated by the Bureau of the Census as of July 1, 1918.

Registered deaths and annual death rates per 1,000 population in certain large cities of the United States, week ended Feb. 22, 1919—Deaths from all causes, and from pneumonia (all forms) and influenza combined.

City.	Population July 1, 1918, estimated.	Total deaths, all causes.	Annual death rate per 1,000.	Death rate for preceding years. ¹	Influenza and pneumonia (all forms).	
					Number of deaths.	Annual death rate per 1,000.
Albany, N. Y.	112,565	48	22.2	C 18.5	10	4.6
Atlanta, Ga.	201,732	76	19.6	C 17.3	90	7.0
Baltimore, Md.	669,981	335	26.1	A 19.8	34	3.7
Birmingham, Ala.	197,670	70	18.5	A 18.4	6	2.8
Buffalo, N. Y.	473,229	154	17.0	C 15.0	233	4.7
Cambridge, Mass.	111,432	32	15.0	A 15.8	78	9.7
Chicago, Ill.	2,596,681	848	17.0	A 17.2	11	4.4
Cincinnati, Ohio	418,022	188	23.5	C 18.1	20	4.6
Cleveland, Ohio	810,306	243	15.6	C 10.7	28	3.6
Columbus, Ohio	225,296	90	20.8	C 20.1	28	3.6
Dayton, Ohio	130,655	39	15.6	C 14.4	20	4.6
Denver, Colo.	128,392	64	26.0	C 13.0	20	4.6
Fall River, Mass.	289,577	117	21.1	C 13.9	20	4.6
Indianapolis, Ind.	213,785	133	22.1	C 14.5	46	7.6
Kansas City, Mo.	568,495	134	12.3	A 13.8	8	7.9
Los Angeles, Cal.	242,707	113	24.3	C 21.3	37	8.0
Louisville, Ky.	109,081	34	16.3	A 21.5	4	1.9
Lowell, Mass.	154,750	100	33.7	C 17.5	20	6.7
Memphis, Tenn.	453,481	101	11.6	A 14.3	23	10.1
Milwaukee, Wis.	383,442	124	16.9	C 10.1	46	5.6
Minneapolis, Minn.	119,215	70	30.6	C 17.9	23	10.1
Nashville, Tenn.	428,684	137	16.7	C 16.5	46	5.6
Newark, N. J.	154,665	45	15.2	C 15.5	44	6.0
New Haven, Conn.	382,273	167	22.8	A 23.7	788	7.9
New Orleans, La.	5,215,879	2,129	21.3	C 15.8	231	6.8
New York, N. Y.	214,206	29	7.1	A 12.7	137	12.0
Oakland, Cal.	1,761,371	720	21.3	A 18.8	12	2.8
Philadelphia, Pa.	593,203	279	24.5	C 16.8	14	2.8
Pittsburgh, Pa.	263,613	91	18.0	C 15.2	26	2.8
Portland, Oreg.	779,951	231	15.4	C 14.7	21	4.2
Providence, R. I.	237,690	52	10.5	C 11.5	28	3.6
St. Louis, Mo.	478,530	167	17.1	C 15.6	12	2.0
St. Paul, Minn.	161,404	48	15.5	C 16.5	12	2.0
San Francisco, Cal.	262,234	81	16.1	A 15.1	21	4.2
Seattle, Wash.	401,681	141	18.3	A 19.4	28	3.6
Spokane, Wash.	173,650	68	20.4	C 15.3	28	3.6
Syracuse, N. Y.						
Toledo, Ohio						
Washington, D. C.						
Worcester, Mass.						

¹ "A" indicates that the rate given is the average annual death rate per 1,000 population for the corresponding week of the years 1913 to 1917, inclusive. "C" indicates that the rate is the annual death rate per 1,000 population for the corresponding week of 1918.

² Population estimated as of July 1, 1919.

³ Rate is based on statistics of 1915, 1916, and 1917.

EPIDEMIC INFLUENZA.

PREVALENCE IN THE UNITED STATES.

Telegraphic reports for the week ended March 1, 1919, received by the Public Health Service show little change in the prevalence of influenza throughout the country. These reports are sent by State health officers and by officers of the Public Health Service in charge of health work in civil zones around Army camps.

Decreases in the number of reported cases of influenza as compared with the preceding week were shown in Alabama, Arkansas,